



ISDH Hospital Service Report

State Form 49476 (R /7-02)

IC 16-21-6

I. Hospital Information

Hospital Name: ST. JOSEPH REGIONAL MEDICAL CENTER (PLYMOUTH CAMPUS)

Provider #: 15-0076

City: PLYMOUTH

County: MARSHALL

Year: 2012

LICENSURE, ACCREDITATION, OR DESIGNATED UNITS (check all that apply)

State Licensure: ☒ Acute License ☐ LTC Certification

Private Accreditation: ☒ JCAHO ☐ HFAP

CMS Specialized Hosp: ☐ CAH ☐ TLC ☐ Rehab

DRG Exempt: ☐ Psych ☐ Rehab ☐ Swing Bed

Number of Total Hospital Full Time Equivalents 263

II. Hospital Service Utilization

Hospital Service Description	Number of Set-up Beds	Number of Discharges	Number of Patient Days	Annual Total Charges
Burn Care	0	0	0	\$0
Cardiac Intensive	0	0	0	\$0
ICU Medical/Surgical	7	286	1282	\$3,539,806
ICU Neonatal	0	50	115	\$191,685
ICU Pediatric	0	0	0	\$0
Medical/Surgical	30	1437	4280	\$6,420,530
Neonatal Intermediate	0	0	0	\$0
Normal Newborn	0	0	0	\$0
Obstetrics	8	392	792	\$2,501,177
Pediatric	0	0	0	\$0
Psychiatric	0	0	0	\$0
Rehabilitation	0	0	0	\$0
Substance Abuse	0	0	0	\$0
Swing Bed Program	NA	0	0	\$0

Extended Care	0	0	0	\$0
Observation Beds	0	0	0	\$0
All Other Services	0	0	0	NA
Total Acute	45	2165	6469	NA

III. Nursing Facility Utilization

	Number of Licensed Beds	Number of Discharges	Number of Patient Days
Nursing Facility	0	0	0

IV. Number of Outpatient Encounters By Diagnostic Group

Please identify the number of outpatient encounters for your hospital by ICD-9-CM Diagnostic Categories

Diagnostic Categories	Number of Encounters	Diagnostic Categories	Number of Encounters
Infectious Disease	772	HIV	0
Neoplasms	4969	Endocrine	9162
Diseases of Blood	1951	Mental Disorders	2004
Nervous	2323	Circulatory	7673
Respiratory	3473	Digestive Diseases	2508
Genitourinary	5966	Pregnancy	1090
Skin	1491	Musculoskeletal	5768
Congenital	85	Perinatal	182
All Injuries	4932		
Other/Known	31053	Total Encounters	85402

Total ED Visits	ED Injury Visits	ED Injury Admissions
15987	14587	1400

Comments